## Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

016757-000314US

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL EI	OR	OTHER THAN		
TC	TAL CLAIMS		35					RATE	FEE	7	RATE	FEE
FC	PR	<del></del> -	NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TC	TAL CHARGEA	ABLE CLAIMS	35 mir	านร 20=	* 15			X\$ 9=	135	OR	X\$18=	
INE	EPENDENT CI	_AIMS	3 mi	nus 3 =	* 6			X43=	70-	OR	X86=	
ML	ILTIPLE DEPEN	IDENT CLAIM P	RESENT	•				+145=		OR	+290=	
* If	the difference	in column 1 is	less than ze	ero, enter	"0" in c	olumn 2		TOTAL	520	OR	TOTAL	
CLAIMS AS AMENDED - PART II								OTHER THAN				
_		(Column 1)	(Colum			(Column 3)	,	SMALL		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	CLAINA	=		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							j	+145=	-	OR	+290=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		<u>.                                    </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	CL AINA	=	1	X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		•										
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	<u> </u>		=	┇	X43=		oR	X86=	
لنا	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145=								·		+290=	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	TOTAL	
**	f the "Highest Nu f the "Highest Nu	mber Previously Pa mber Previously Pa	iid For' IN THIS aid For' IN THIS	S SPACE is S SPACE is	less than less than	n 20, enter "20 n 3, enter "3."	. ,	TOTAL ADDIT. FEE		OR ,	ADDIT. FEE	
		ber Previously Pai					er fou	ınd in the app	ropriate box	in col	umn 1.	